Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse 0	Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Kelley First name	First name	
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your	Anderson		
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr.,	Ir., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names and any assumed, trade names and doing business as names.			
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0069		

Del	btor 1 Kelley J Anderso	n	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Your Employer Identification Number (EIN), if any.					
	(Livy, ii dily.	EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		13832 US Highway 12			
		Brooklyn, MI 49230 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Lenawee			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Kelley J Anderson			Case number (if known)					
Par	t 2: Tell the Court About	our Bankı	ruptcy Ca	se				
7. The chapter of the Bankruptcy Code you are choosing to file under		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Chapt	er 7					
		☐ Chapt	er 11					
		☐ Chapt	er 12					
		■ Chapt	er 13					
8.	How you will pay the fee	abo ord	out how you er. If your	u may pay. Typically, if attorney is submitting y	you are paying the fee	eck with the clerk's office in your local court for more deta yourself, you may pay with cash, cashier's check, or mor shalf, your attorney may pay with a credit card or check w	ney	
		☐ Ine		the fee in installmen		tion, sign and attach the Application for Individuals to Pa	У	
			•	e <i>in Installments</i> (Officia t mv fee be waived (Y	,	ion only if you are filing for Chapter 7. By law, a judge ma	iV.	
		but app	is not requ lies to you	uired to, waive your fee Ir family size and you a	, and may do so only if y re unable to pay the fee	your income is less than 150% of the official poverty line in installments). If you choose this option, you must fill official Form 103B) and file it with your petition.	that	
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known	-	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
	residence :	☐ Yes.	Has you	ur landlord obtained an	eviction judgment again	nst you?		
				No. Go to line 12.				
			_	Yes. Fill out <i>Initial Stat</i> this bankruptcy petition		n Judgment Against You (Form 101A) and file it as part o	f	

Deb	tor 1 Kelley J Anderson	1			Case number (if known)		
ar	Report About Any Bu	ısinesses	You Owr	n as a Sole Propriet	or		
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busi	ness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code		
	it to this petition.		Chec	k the appropriate box	to describe your business:		
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				,	(as defined in 11 U.S.C. § 101(6))		
				None of the above	(40 40 40 40 40 40 40 40 40 40 40 40 40 4		
				Trone of the above			
3.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business	deadline operation	s. If you ir	ndicate that you are a low statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
business	For a definition of <i>small</i> business debtor, see 11	■ No.					
	U.S.C. § 101(51D).	□ No.	I am f Code	•	1, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and I under Subchapter V of Chapter 11.		
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.		
ari	t 4: Report if You Own or	Have An	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention		
4.	_	■ No.			., .,		
	property that poses or is	_					
	alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?			
	identifiable hazard to public health or safety?		What is	aro nazara.			
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
	- ,				Number, Street, City, State & Zip Code		

Debtor 1 Kelley J Anderson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Kelley J Andersor	1		Case number	f (if known)			
Par	t 6: Answer These Questi	ons for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	e that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses		□ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99	1	□ 5001-10,000	□ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	camined this petition, and I decla	re under penalty of perjury that the inform	nation provided is true and correct.			
				am aware that I may proceed, if eligible, ief available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, loose to proceed under Chapter 7.			
				t pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupt and 357	cy case can result in fines up to 1.	oncealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Kelley .	ey J Anderson J Anderson e of Debtor 1	Signature of Debto	r 2			
		Executed	d on July 10, 2024	Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

represented by one und for for and attorney, you do not need to file this page.	der Chapter 7, 11, 12, or 13 of title 11, United Stat which the person is eligible. I also certify that I had, in a case in which § 707(b)(4)(D) applies, certify nedules filed with the petition is incorrect.	es Code, and have ave delivered to the ave that I have no known	debtor(s) the notice required by 11 U.S.C. § 342(b)
an attorney, you do not need sch to file this page.	nedules filed with the petition is incorrect.		wledge after an inquiry that the information in the
		_	
	'Tricia S. Terry	Date	July 10, 2024
	gnature of Attorney for Debtor		MM / DD / YYYY
	icia S. Terry P59522		
	nted name		
	arrs & Terry, PLLC		
Firm	n name		
659	53 Jackson Rd		
	nn Arbor, MI 48103		
Num	nber, Street, City, State & ZIP Code		
Con	ntact phone 734-663-0555	Email address	TTerry@marrsterry.com; mandtecf@gmail.com

P59522 MI Bar number & State

		nation to identify your					
Deb	tor 1	Kelley J Anderso First Name	Middle Name	Last Name			
	tor 2 use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN			
	e number _						
(if kn	own)					_	c if this is an ded filing
~ .		4000					
		rm 106Sum	and Liabilities a	nd Certain Statistical Inf	formation		40/45
Be a nfor our	s complete a mation. Fill o original for	and accurate as possib out all of your schedulens, you must fill out a	es first; then complete t	e are filing together, both are equall he information on this form. If you a k the box at the top of this page.	y responsible fo	r supplyin	
Part	Summ	arize Your Assets				.,	
						Your a	ssets of what you own
1.		/B: Property (Official Fo e 55, Total real estate, fo				\$	190,000.00
	1b. Copy lin	e 62, Total personal prop	perty, from Schedule A/B.			\$	92,125.79
	1c. Copy line	e 63, Total of all property	y on Schedule A/B			\$	282,125.79
Part	2: Summ	arize Your Liabilities					
							abilities t you owe
2.			laims Secured by Property mn A, Amount of claim, at	y (Official Form 106D) t the bottom of the last page of Part 1 o	of Schedule D	\$	190,220.60
3.			Unsecured Claims (Official 1) (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	200.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F		\$	66,576.41
				You	r total liabilities	\$	256,997.01
Part	3: Summ	arize Your Income and	Expenses				
4.		Your Income (Official Fo		e /		\$	5,266.97
5.		Your Expenses (Official nonthly expenses from li				\$	3,166.00
	4: Answe	er These Questions for	Administrative and Stat	tistical Records			
Part		ng for bankruptcy unde	er Chapters 7, 11, or 13?	? Check this box and submit this form to	the court with you	ur other sch	nedules.
	-	u have nothing to report	on this part of the form. C				
Part 6. 7.	□ No. Yo ■ Yes	u have nothing to report of debt do you have?	on this part of the form.				

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9,705.67 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	200.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	6,742.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,942.00

	Kelley J Ande	erson					
Debtor 1	First Name		Name	Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle	e Name	Last Name			
Jnited States	Bankruptcy Court for the	ne: EASTERN	DISTRI	CT OF MICHIGAN			
Case number	, ,						
Jase Humber							☐ Check if this is a amended filing
Official F	Form 106A/B						
Schedu	ule A/B: Pro	operty					12/15
_	Go to Part 2. Where is the property?						
	IS Highway 12		What	is the property? Check all that apply			
13832 เ	JS Highway 12 ess, if available, or other descri	iption	•	Single-family home			aims or exemptions. Put d claims on <i>Schedule D:</i>
		iption	What ■ □		the amount	of any secure	
13832 เ		iption	■	Single-family home Duplex or multi-unit building	the amount Creditors V	of any secure Vho Have Claii	d claims on Schedule D: ms Secured by Property.
Street address	ess, if available, or other descri	49230-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va	of any secure Who Have Clain Iue of the perty?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
13832 U Street addre	ess, if available, or other descri			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount Creditors M Current va entire prop	of any secure Who Have Clain lue of the perty?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00
Street address	ess, if available, or other descri	49230-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va entire prop	of any secure Who Have Clair lue of the serty? 00,000.00 he nature of yes simple, ten	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00
Street address	ess, if available, or other descri	49230-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop \$19 Describe ti (such as fe a life estate	lue of the herty? 30,000.00 he nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00
Street address	ess, if available, or other descri	49230-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire prop	lue of the herty? 30,000.00 he nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00
Street address Brookly City	ess, if available, or other descri	49230-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$19 Describe ti (such as fe a life estate	lue of the perty? 00,000.00 the nature of yes simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00 rour ownership interest ancy by the entireties, of
Brookly City	ess, if available, or other descri	49230-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$19 Describe ti (such as fe a life estate Fee Sim	lue of the perty? 00,000.00 he nature of yee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00
Brookly City	ess, if available, or other descri	49230-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this it	Current va entire prop \$19 Describe ti (such as fe a life estate Fee Sim	lue of the perty? 00,000.00 he nature of yee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00 rour ownership interest ancy by the entireties, o
Brookly City	ess, if available, or other descri	49230-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iterty identification number:	Current va entire prop \$19 Describe ti (such as fe a life estate Fee Sim	lue of the perty? 00,000.00 he nature of yee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$190,000.00 rour ownership interest ancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 Kell	ey J Anderson		Case number (if known)			
Cars, vans, tru	ucks, tractors, sport utility ve	hicles, motorcycles				
□No						
Yes						
	Ford	What was transfer to the same of O.S.	Do not deduct secure	Do not deduct secured claims or exemptions. Put		
wako.	-010 -150	Who has an interest in the property? Check one	the amount of any secured claims on Schedule D:			
		Debtor 1 only	Creditors who have t	Claims Secured by Property.		
Year: 2 Approximate	2018 e mileage: 65000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?		
Other inform		☐ At least one of the debtors and another	entire property?	portion you own:		
	Plate: 71KEL	At least one of the debtors and another				
State of C Title Date Registrati 2/22/2026 Engine Si	EW1EP2JFB25712 Drigin: MI S: ion Expiration:	☐ Check if this is community property (see instructions)	\$22,000.00	922,000.00		
-						
3.2 Make: F	Ford	Who has an interest in the property? Check one	Do not deduct secure	d claims or exemptions. Put		
_	Edge	_		cured claims on Schedule D: Claims Secured by Property.		
	<u>-uge</u> 2008	Debtor 1 only		, ,		
Approximate		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?		
Other inform		At least one of the debtors and another	onthio property.	portion you own.		
		The least one of the debtors and another				
		☐ Check if this is community property (see instructions)	\$2,000.00	\$2,000.00		
Examples: Boat ■ No □ Yes Add the dollar	is, trailers, motors, personal wa	the other recreational vehicles, other vehicles, a stercraft, fishing vessels, snowmobiles, motorcycles, snowmobiles, motorcycles, and for all of your entries from Part 2, including that number here	any entries for	\$24,000.00		
art 3: Describe	Your Personal and Household Ite	ems				
		terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
	ods and furnishings jor appliances, furniture, linens ibe	, china, kitchenware				
	Appliances, fur	niture, general household goods		\$2,800.0		
Electronics Examples: Tele		eo, stereo, and digital equipment; computers, prin	ters, scanners; music colle	ections; electronic devices		

page 2

Schedule A/B: Property

including cell phones, cameras, media players, games

☐ No Official Form 106A/B

D	ebtor 1	Kelley J And	derson Case number (if know	n)
	Yes.	Describe		
			Televisions - 2, Tablet, cell phone	\$800.00
8.			figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coons, memorabilia, collectibles	in, or baseball card collections;
		Describe		
9.		ent for sports a es: Sports, photo musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe	es and kayaks; carpentry tools;
	☐ Yes.	Describe		
10	■ No		s, shotguns, ammunition, and related equipment	
11	□ No ´		othes, furs, leather coats, designer wear, shoes, accessories	
			Everyday clothes	\$600.00
12	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems	
			Costume Jewelry	\$500.00
13	Examp □ No	rm animals oles: Dogs, cats, Describe		
			5 dogs, 1 cat, 1 birds, - sentimental value only	\$0.00
14	■ No	her personal an	d household items you did not already list, including any health aids you did not list	
15			of all of your entries from Part 3, including any entries for pages you have attached number here	\$4,700.00
		scribe Your Finan		
D	o you ow	n or have any l	egal or equitable interest in any of the following?	Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Kelley J And	erson		Case number (if known)	
					deduct secured or exemptions.
16. Cash	ı				
	mples: Money you h	nave in y	our wallet, in your home, i	in a safe deposit box, and on hand when you file your petition	
■ No					
⊔ Yes	S				
	sits of money	ndaga a	r other financial accounts	certificates of deposit; shares in credit unions, brokerage houses, and c	sth or oimilor
Lxai				the same institution, list each.	tilei Siiililai
□ No				Institution name:	
■ Yes	3			Institution name:	
		17.1.	Checking/Savings	True Community CU	\$80.00
		17.2.	Transfers	Cash App	\$0.00
		17.3.	Checking	Chime	\$0.00
					• • • • • • • • • • • • • • • • • • • •
19. Non-	spublicly traded sto	ock and	Institution or issuer name	d and unincorporated businesses, including an interest in an LLC,	partnership, and
■ No	venture				
☐ Yes	s. Give specific info		about them		
		Nai	ne of entity:	% of ownership:	
Nego Non- ■ No	otiable instruments	include pents are	personal checks, cashiers those you cannot transfer	e and non-negotiable instruments ' checks, promissory notes, and money orders. ' to someone by signing or delivering them.	
<i>Exar</i> □ No	ement or pension nples: Interests in I	RA, ERIS	SA, Keogh, 401(k), 403(b)), thrift savings accounts, or other pension or profit-sharing plans	
- res	s. List each accoun		ely. of account:	Institution name:	
		Thrif	t Savings Plan	TSP	\$61,845.79
Your		d deposit	s you have made so that	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies, or others	i
	S			Institution name or individual:	
	orm 106A/B		Sc	hedule A/B: Property	page 4

Debtor 1	Kelley J Anderso	on		Case number (if known)	
■ No		eriodic payment of money t	to you, either for life or for a number o	of years)	
⊔ Yes.	Issuer i	name and description.			
26 U.S ■ No	i.C. §§ 530(b)(1), 529A	(b), and 529(b)(1).	lified ABLE program, or under a questions of any inte		ram.
■ No	s, equitable or future i		er than anything listed in line 1), a	nd rights or powers exerc	isable for your benefit
<i>Exam</i> ■ No	nples: Internet domain r	names, websites, proceeds	other intellectual property from royalties and licensing agreeme		
Exam ■ No		tion object the con-	ative association holdings, liquor lice	.,	
Money or	r property owed to you	1?			Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	efunds owed to you Give specific informat	ion about them, including w	whether you already filed the returns a	and the tax years	
■ No			port, child support, maintenance, div	orce settlement, property se	ettlement
Exam ■ No		sability insurance payment oans you made to someon	s, disability benefits, sick pay, vacati e else	on pay, workers' compens	ation, Social Security

page 5

Schedule A/B: Property

Official Form 106A/B

Debtor 1	Kelley J Anderso	n	Case number (if known)	
	sts in insurance polic ples: Health, disability,	ies or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insura	nce
■ Yes.		ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	-	Through Employer - Term Only	Children	\$0.00
If you somed	are the beneficiary of a one has died. Give specific informat	t is due you from someone who has died living trust, expect proceeds from a life insura	ance policy, or are currently entitled to rec	eive property because
<i>Exam</i> ■ No		, whether or not you have filed a lawsuit or yment disputes, insurance claims, or rights to		
■ No	contingent and unliques of the contingent of the continues of the continue	uidated claims of every nature, including co	ounterclaims of the debtor and rights to	e set off claims
35. Any fir ■ No	nancial assets you did	d not already list		
☐ Yes.	Give specific informat	ion		
		of your entries from Part 4, including any e er here		\$61,925.79
Part 5: De	escribe Any Business-Re	lated Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
	own or have any legal on to Part 6.	equitable interest in any business-related prope	erty?	
☐ Yes. 0	Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou	ınts receivable or con	nmissions you already earned		
□ No □ Yes.	Describe			
	equipment, furnishin	gs, and supplies computers, software, modems, printers, copie	vo for machines, rigg taleshares della	phoire electronic de des

page 6

Schedule A/B: Property

Official Form 106A/B

Debtor 1	Kelley J And	erson	Case number (if known)	
□ No	<u> </u>			
☐ Yes.	Describe			
40. Machin	nery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
□ No				
⊔ Yes.	Describe		1	
41. Invent	tory			
□ No □ Yes.	Describe			
42. Interes	sts in partnership	os or joint ventures		
□ No				
☐ Yes.	Give specific info	ormation about them Name of entity:	% of ownership:	
		name of onety.	%	
43. Custor	mer lists, mailing	lists, or other compilations		
☐ No.	_			
⊔ во уо	ur iists include per	sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□ No □ Yes. Describe			
44. Any b u	usiness-related p	property you did not already list		
□ No				
☐ Yes.	Give specific info	rmation		
45 4.1.1	de delle sestes e	Call Communication Communication		
		of all of your entries from Part 5, including any entries for pages number here		
			_	
		and Commercial Fishing-Related Property You Own or Have an Interest In Interest in farmland, list it in Part 1.		
	u own or have an Go to Part 7.	y legal or equitable interest in any farm- or commercial fishing-r	elated property?	
Yes	s. Go to line 47.			Current value of the
				portion you own? Do not deduct secured claims or exemptions.
47. Farm a		oultry, farm-raised fish		
□ No				
Yes				

Official Form 106A/B Schedule A/B: Property page 7

Debt	or 1 K	elley J Anders	on		Case number (if known)	
		4 (goats, 1 horse and chickens, du	cks and turkeys		\$1,500.00
48 C	rons—eit	her growing or	harvested			
	No	ner growing or	nai vesteu			
		e specific informa	ation			
		ishing equipme	nt, implements, machinery, fixtures	, and tools of trade		
	No Yes					
ш	res					
50. F	arm and t	ishing supplies	, chemicals, and feed			
	No					
	Yes					
	_					
	-	and commercia	I fishing-related property you did no	t already list		
	No Give	e specific informa	ation			
	i es. Give	s specific informa				
52.	Add the	dollar value of a	II of your entries from Part 6, includi	ng any entries for pag	es vou have attached	
			ber here			\$1,500.00
					ı	
Part 7	7: De	escribe All Proper	y You Own or Have an Interest in That Yo	ou Did Not List Above		
			y of any kind you did not already lis	t?		
		Season tickets,	country club membership			
	No					
Ц	Yes. Give	e specific informa	ition			
54.	Add the	dollar value of a	ll of your entries from Part 7. Write t	hat number here		\$0.00
Part 8	List	the Totals of Eac	h Part of this Form			
55.	Part 1: To	otal real estate,	line 2			\$190,000.00
56.	Part 2: To	tal vehicles, lin	e 5	\$24,000.00		
57.	Part 3: To	otal personal an	d household items, line 15	\$4,700.00		
58.	Part 4: To	otal financial as	sets, line 36	\$61,925.79		
59.	Part 5: To	otal business-re	lated property, line 45	\$0.00		
60.	Part 6: To	otal farm- and fi	shing-related property, line 52	\$1,500.00		
61.	Part 7: To	otal other prope	rty not listed, line 54	+\$0.00		
62.	Total ner	sonal property	Add lines 56 through 61	\$92,125.79	Copy personal property to	otal \$92,125.79
J <u>L</u> .	. otal pel	oonar property.	, adoo oo anough or	Ψ32,123.13	copy porsonal property t	Ψ32,123.73
63.	Total of a	II property on S	chedule A/B. Add line 55 + line 62			\$282,125.79

Fill in this infor				
Debtor 1	Kelley J Anderso	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Print description of the assessment and line as Comment value of the Assessment of t

Schedule A/B that lists this property	portion you own		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
13832 US Highway 12 Brooklyn, MI 49230 Lenawee County	\$190,000.00		\$28,976.40	Mich. Comp. Laws § 600.5451(1)(m)
2024 2024 SEV \$95,0000 Line from Schedule A/B: 1.1		100% of fair market value, up to any applicable statutory limit		000.0401(1)(11)
2008 Ford Edge 150000 miles Line from Schedule A/B: 3.2	\$2,000.00		\$2,000.00	Mich. Comp. Laws § 600.5451(1)(g)
Life from Schedule AVB. 3.2			100% of fair market value, up to any applicable statutory limit	300.3431(1)(g)
Appliances, furniture, general household goods	\$2,800.00		\$2,800.00	Mich. Comp. Laws § 600.5451(1)(c)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	000.0401(1)(0)
Televisions - 2, Tablet, cell phone Line from Schedule A/B: 7.1	\$800.00		\$800.00	Mich. Comp. Laws § 600.5451(1)(c)
Line Holli Schedule A.B. 111			100% of fair market value, up to any applicable statutory limit	000.0401(1)(0)
Everyday clothes Line from Schedule A/B: 11.1	\$600.00		\$600.00	Mich. Comp. Laws §
Line Irom Scriedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	600.5451(1)(a)(iii)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Deb	otor 1 Kelley J Anderson			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Costume Jewelry Line from Schedule A/B: 12.1	\$500.00		\$500.00	Mich. Comp. Laws § 600.5451(1)(c)	
			☐ 100% of fair market value, up to any applicable statutory limit			
	Checking/Savings: True Community	\$80.00	\$80.00 ■ \$80		Mich. Comp. Laws § 600.6023(1)(a)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	000.0025(1)(a)	
	Thrift Savings Plan: TSP Line from Schedule A/B: 21.1	\$61,845.79		\$61,845.79	Mich. Comp. Laws § 600.5451(1)(I)	
	Ellie Holli Genedale Av.B. 2111			100% of fair market value, up to any applicable statutory limit	000.0-10 1(1)(1)	
	4 goats, 1 horse and chickens, ducks and turkeys	\$1,500.00		\$1,500.00	Mich. Comp. Laws § 600.5451(1)(e)	
	Line from Schedule A/B: 47.1			100% of fair market value, up to any applicable statutory limit	000.3431(1)(e)	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every № No			led on or after the date of adjustme	nt.)	
	Yes. Did you acquire the property covered No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	☐ Yes					

Fill in this	s information to identify you	ır case:			
Debtor 1	Kelley J Anders First Name	Middle Name Last Name		_	
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name Last Name		-	
	ates Bankruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN			
_				-	
Case num	iber			☐ Check	if this is an
()					led filing
					.ou ming
Official	Form 106D				
Sched	dule D: Creditors	Who Have Claims Secur	ed by Propert	tv	12/15
	copy the Additional Page, fill it o	If two married people are filing together, both ar out, number the entries, and attach it to this form			
•	reditors have claims secured by	/ vour property?			
	•	nis form to the court with your other schedules	s. You have nothing else	to report on this form.	
_		•	. Tournavo nouming oldo	to roport on the form.	
	s. Fill in all of the information	below.			
Part 1:	List All Secured Claims		Calumn A	Calumn B	Calumn C
		more than one secured claim, list the creditor separa		Column B	Column C
		a particular claim, list the other creditors in Part 2. cal order according to the creditor's name.	As Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<i>7</i> 1 1	rington Mortgage vices	Describe the property that secures the claim:	\$139,608.00	\$190,000.00	\$0.00
	tor's Name	13832 US Highway 12 Brooklyn, MI 49230 Lenawee County			
	n: Bankruptcy 0 South Douglass	2024 2024 SEV \$95,0000			
	nd, Stes 110 & 200	As of the date you file, the claim is: Check all tha			
	nheim, CA 92806	apply. Contingent			
Numb	per, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes	s the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1	1 only	☐ An agreement you made (such as mortgage o	secured		
☐ Debtor 2	,	car loan)			
_	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier)		
_	one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check i	if this claim relates to a unity debt	Other (including a right to offset)			
	Opened				
	04/22 Last				

Date debt was incurred 5/01/24

Last 4 digits of account number

6820

Deb	tor 1 Kelley J Anderson	C	ase number (if known)		
	First Name Middle N	lame Last Name			
2.2	Dept of Housing & Urban Development	Describe the property that secures the claim:	\$9,879.60	\$190,000.00	\$0.00
	Creditor's Name	13832 US Highway 12 Brooklyn, MI 49230 Lenawee County 2024 2024 SEV \$95,0000			
	451 7th Street SW Washington, DC 20410	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or sector car loan)	ured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)			
Date	debt was incurred 11/2020	Last 4 digits of account number 0069			
2.3	Dept of Housing & Urban Development	Describe the property that secures the claim:	\$11,536.00	\$190,000.00	\$0.00
	Creditor's Name	13832 US Highway 12 Brooklyn, MI			
		49230 Lenawee County			
		2024 2024 SEV \$95,0000			
	451 7th Street SW	As of the date you file, the claim is: Check all that apply.			
	Washington, DC 20410	As of the date you file, the claim is: Check all that apply. Contingent			
		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
14 /1-	Washington, DC 20410 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
_	Washington, DC 20410 Number, Street, City, State & Zip Code o owes the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.			
	Washington, DC 20410 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	ured		
	Washington, DC 20410 Number, Street, City, State & Zip Code Do owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sections)	ured		
	Washington, DC 20410 Number, Street, City, State & Zip Code Do owes the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sectoral loan)	ured		
	Washington, DC 20410 Number, Street, City, State & Zip Code Do owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sectoral loan) Statutory lien (such as tax lien, mechanic's lien)	ured		

Debtor 1 Kelley J Anderson				Case number (if known)			
First Name	Middle N	ame Last Name		-			
2.4 Driveway Fina	nce Corp	Describe the property that secures the c	laim:	\$29,197.00	\$22,000.00	\$7,197.00	
Attn: Bankrup 150 N. Bartlett Medford, OR S	t St.	2018 Ford F150 65000 miles License Plate: 71KEL Tag Type: Private VIN: 1FTEW1EP2JFB25712 State of Origin: MI Title Date: Registration Expiration: 2/22/20 Engine Size: 165 Body: Crew Pickup Owner: Registrant: KELLEY JEAN AND As of the date you file, the claim is: Checkapply. Contingent	ERS				
Number, Street, City, S	State & Zip Code	☐ Unliquidated					
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortg	age or secured				
Debtor 1 and Debtor 2	- ,	Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)					
Date debt was incurred	Opened 1/28/23 Last Active 5/09/24	Last 4 digits of account number	7801				
	•	column A on this page. Write that number h	ere:	\$190,220.60	=		
Write that number her	•	the donar value totals from an pages.		\$190,220.60			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill by this but a month	and a falantificance						
Fill in this information	on to identify your o	case:					
	Kelley J Andersor						
•	rirst Name	Middle Name	Last Name	8			
Debtor 2 (Spouse if, filing)	irst Name	Middle Name	Last Name	9			
United States Bankru	iptcy Court for the:	EASTERN DIS	TRICT OF MICHIGAN				
Case number							
(if known)						☐ Check	if this is an
						amend	ed filing
Official Form 1 Schedule E/F:		ho Have U	nsecured Claim	s			12/15
eft. Attach the Continu name and case number	ation Page to this page	e. If you have no ir	f more space is needed, co nformation to report in a Pa				
1. Do any creditors h							
□ No. Go to Part 2		a ciaillis agailist yo	,u:				
Yes.	•						
2. List all of your price identify what type of possible, list the cla	f claim it is. If a claim ha ims in alphabetical orde	s both priority and nor according to the c	nore than one priority unsecution conpriority amounts, list that or reditor's name. If you have me to other creditors in Part 3.	claim here a	nd show both priority a	nd nonpriority amount	ts. As much as
(For an explanation	of each type of claim, s	ee the instructions f	or this form in the instruction	booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1 Internal Re	venue Service	Last 4	I digits of account number	0069	\$200.00	\$200.00	\$0.0
Priority Credito	r's Name			-			· ·
PO Box 73		When	was the debt incurred?	2021			
PO Box 73 Philadelph	ia, PA 19101				all that apply		
PO Box 73 Philadelph Number Street		As of	the date you file, the claim		all that apply		
PO Box 73 Philadelph Number Street	ia, PA 19101 City State Zip Code	As of	the date you file, the claim		all that apply		
PO Box 73- Philadelph Number Street Who incurred the	ia, PA 19101 City State Zip Code	As of	the date you file, the claim ontingent		all that apply		
PO Box 73 Philadelph Number Street Who incurred the Debtor 1 only	ia, PA 19101 City State Zip Code e debt? Check one.	As of	the date you file, the claim	is: Check a	all that apply		
PO Box 73 Philadelph Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and D	ia, PA 19101 City State Zip Code e debt? Check one.	As of Co	the date you file, the claim ontingent liquidated sputed	is: Check a	all that apply		
PO Box 73 Philadelph Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and D At least one of	ia, PA 19101 City State Zip Code debt? Check one. Debtor 2 only the debtors and anothe	As of Co Un Dis Type	the date you file, the claim ontingent eliquidated sputed of PRIORITY unsecured claim on the sputes of priority unsecured claim on the sputes of the sputes	is: Check a	,		
PO Box 73 Philadelph Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of	ia, PA 19101 City State Zip Code de debt? Check one. Debtor 2 only the debtors and anothe	As of Co Un Dis Type Do ity debt Ta	the date you file, the claim ontingent sliquidated sputed of PRIORITY unsecured claim omestic support obligations are and certain other debts yet.	is: Check a	government		
PO Box 73 Philadelph Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and D At least one of	ia, PA 19101 City State Zip Code de debt? Check one. Debtor 2 only the debtors and anothe	As of Co Un Dis Type Type Type Co Co Co Co Co Co Co Co Co C	the date you file, the claim ontingent eliquidated sputed of PRIORITY unsecured claim on the sputes of priority unsecured claim on the sputes of the sputes	is: Check a	government		

Kelley J Anderson		Case number (if known)		
State of Michigan	Last 4 digits of account number	\$0.00	\$0.00	\$0.
Priority Creditor's Name Dept of Treasury Bankruptcy Unit PO Box 30168 Lansing, MI 48909	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
■ Debtor 1 only	☐ Unliquidated			
☐ Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury	-		
■ No	Other. Specify			
☐ Yes	For Notice			
Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit Yes.	ns against you? this form to the court with your other sche			
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what t	holds each claim. If a creditor has rype of claim it is. Do not list claims alr	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of the unsecured claim, list the other Part 2.	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what t	holds each claim. If a creditor has rype of claim it is. Do not list claims alr three nonpriority unsecured claims fil	ready included in Part	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what t	holds each claim. If a creditor has rype of claim it is. Do not list claims alr	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456	this form to the court with your other scheet alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than	holds each claim. If a creditor has rype of claim it is. Do not list claims alr three nonpriority unsecured claims fil	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number	holds each claim. If a creditor has represented the property of claim it is. Do not list claims always three nonpriority unsecured claims files. 3698 2022	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred?	holds each claim. If a creditor has represented the property of claim it is. Do not list claims always three nonpriority unsecured claims files. 3698 2022	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred?	holds each claim. If a creditor has represented the property of claim it is. Do not list claims always three nonpriority unsecured claims files. 3698 2022	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i	holds each claim. If a creditor has represented the property of claim it is. Do not list claims always three nonpriority unsecured claims files. 3698 2022	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i	holds each claim. If a creditor has represented the property of claim it is. Do not list claims always three nonpriority unsecured claims files. 3698 2022	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	this form to the court with your other sche alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated	holds each claim. If a creditor has rype of claim it is. Do not list claims alreading three nonpriority unsecured claims fil 3698 2022 s: Check all that apply	ready included in Part Il out the Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	holds each claim. If a creditor has rype of claim it is. Do not list claims all three nonpriority unsecured claims fil 3698 2022 s: Check all that apply	ready included in Part Il out the Continuation Total claim	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	holds each claim. If a creditor has rype of claim it is. Do not list claims alreading three nonpriority unsecured claims fil 3698 2022 s: Check all that apply	ready included in Part Il out the Continuation Total claim	1. If more Page of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bixby Anesthesia Associates Nonpriority Creditor's Name P.O. Box 456 Adrian, MI 49221 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	holds each claim. If a creditor has review of claim it is. Do not list claims all three nonpriority unsecured claims files. 3698 2022 s: Check all that apply	ready included in Part Il out the Continuation Total claim	1. If more Page of

1 Kelley J Anderson		Case number (if known)			
BMG Money	Last 4 digits of account number	7544	\$3,115.00		
Nonpriority Creditor's Name Attn: Bankruptcy 444 Brickell Avenue Suite 250 Miami, FL 33131	When was the debt incurred?	Opened 09/23 Last Active 05/24			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
Debtor 1 only	Contingent				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	ng plans, and other similar debts			
Yes	Other. Specify Unsecured				
Congress Collection Nonpriority Creditor's Name	Last 4 digits of account number	9559	\$480.25		
28552 Orchard Lake Rd Suite 200	When was the debt incurred?	March 2024			
Farmington, MI 48334 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharin				
Yes	Other. Specify Medical	J			
Consultants in Lab Medicine of Greater T	Last 4 digits of account number	0703	\$8.50		
Nonpriority Creditor's Name PO Box 930521 Atlanta, GA 31193	When was the debt incurred?	2022			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
is the claim subject to Uliset!	report as priority trains				
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			

Debto	r 1 Kelley J Anderson	Case number (if known)	
1.5	Consumer Energy Nonpriority Creditor's Name	Last 4 digits of account number 0069	\$1,600.00
	One Energy Plaza Jackson, MI 49201	When was the debt incurred? 2024	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	you did not
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Account	
1.6	Dr. Tedders	Last 4 digits of account number 0011	\$5,708.85
	Nonpriority Creditor's Name 3595 Ann Arbor Rd	When was the debt incurred? 2021	
	Jackson, MI 49202 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	you did not
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	<u> </u>	• • • • • • • • • • • • • • • • • • • •	
	☐ Yes	Other. Specify Judgment	
1.7	Education Department Office of General	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 400 Maryland AVe SW Room 6E353	When was the debt incurred?	
	Washington, DC 20202 Number Street City State Zip Code	As of the date year file the plains in Observal all the translation	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	you did not
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify For Notice	

Kelley J Anderson		Case number (if known)	
George Gusses, Co. Nonpriority Creditor's Name	Last 4 digits of account number	0827	\$2,041.52
33 S. Huron Street	When was the debt incurred?	May 2024	
Toledo, OH 43602-1705 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Judgment	for Promedica	
GreenSky	Last 4 digits of account number	1205	\$5,635.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 10/23 Last Active	
5565 Glenridge Connector Suite #700	When was the debt incurred?	5/28/24	
Atlanta, GA 30342 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the olding	o. Chook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Unsecured		
High Priority Loans	Last 4 digits of account number	0069	\$500.00
Nonpriority Creditor's Name 229 S Main St	When was the debt incurred?	2021	
Suite 1300			
Salt Lake City, UT 84111 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
— NO	■ Other Specify Allotment of		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

1 Kelley J Anderson		Case number (if known)		
Nelnet	Last 4 digits of account number	0471	\$6,742.0	
Nonpriority Creditor's Name Attn: Bankruptcy Claims P.O. Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 05/17 Last Active 04/24		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent			
	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes	Other. Specify			
	Educationa	ıl		
One Main Financial	Last 4 digits of account number	8225	\$11,973.0	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3251 Evansville, IN 47731	When was the debt incurred?	Opened 11/21 Last Active 04/24		
Number Street City State Zip Code	As of the date you file, the claim i			
Who incurred the debt? Check one.	•	,		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Loan			
DMD		5149	#0.700 -	
RMP Nonpriority Creditor's Name	Last 4 digits of account number		\$2,792.7	
PO Box 630844 Cincinnati, OH 45263	When was the debt incurred?	2022		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
\square At least one of the debtors and another	st one of the debtors and another Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	a plans, and other similar debts		
Yes	Other. Specify Collections	-wedical		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Kelley J Anderson	Case number (if known)					
Robert M Doane MD PC	Last 4 digits of account number 0069	\$0.0				
Nonpriority Creditor's Name 1701 Lake Lansing Rd., Ste 100 Lansing, MI 48912-3798	When was the debt incurred? 2024					
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	• ,					
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did report as priority claims	l not				
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify For Notice					
System & Services Techonologies						
Inc	Last 4 digits of account number 7519	\$23,000.				
Nonpriority Creditor's Name PO Box 801997 Kansas City, MO 64180	When was the debt incurred? 2022					
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
☐ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt	\square Obligations arising out of a separation agreement or divorce that you did	I not				
Is the claim subject to offset?	report as priority claims					
No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Loan					
Trinitiy Health	Last 4 digits of account number 5701	\$72.				
Nonpriority Creditor's Name						
20555 Victor Pkwy	When was the debt incurred? 2021					
Livonia, MI 48152 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	•					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did report as priority claims	l not				
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Medical					

Debtor 1 Kelley J Anderson		Case number (if known)				
4.1 7	True Community Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0056	\$1,825.00		
	Attn: Bankruptcy Dept 1100 Clinton Rd	When was the debt incurred?	Opened 03/24 Last Active 06/24			
	Jackson, MI 49201 Number Street City State Zip Code	As of the date you file, the claim		-		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts			
	Yes	Other. Specify Unsecured	I	-		
4.1	True Community Credit Union	Last 4 digits of account number	0150	\$1,002.00		
	Nonpriority Creditor's Name	_				
	Attn: Bankruptcy Dept 1100 Clinton Rd	When was the debt incurred?	Opened 05/16 Last Active 06/24			
	Jackson, MI 49201	when was the debt incurred?	00/24	-		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts			
	Yes	Other. Specify Credit Car	d	-		
Part 3	List Others to Be Notified About a De	ebt That You Already Listed				
is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts the ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	y here. Similarly, if you		
	and Address	On which entry in Part 1 or Part 2 did you	_			
ECM(Bankruptcy Department		☐ Part 1: Creditors with Priority Unsecured Clai			
PO B	ox 16408 Paul, MN 55116	•	Part 2: Creditors with Nonpriority Unsecured	Claims		
		Last 4 digits of account number				
Name a	and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?			
	torney		Part 1: Creditors with Priority Unsecured Clai	ims		
	Civil Division		☐ Part 2: Creditors with Nonpriority Unsecured			
211 V Suite	/. Fort Street					
	it, MI 48226					
		Last 4 digits of account number				
Name a	and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?			
US A	ttorney		☐ Part 1: Creditors with Priority Unsecured Clai	ims		
	Civil Division <i>I</i> . Fort Street	•	Part 2: Creditors with Nonpriority Unsecured	Claims		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1	Kelley J Anderson	Case number (if known)	

Suite 2001 Detroit, MI 48226

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 200.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 200.00
Total	6f.	Student loans	6f.	\$ Total Claim 6,742.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,834.41
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 66,576.41

Fill in this information to identify your case:						
Debtor 1 Kelley J Anderson						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN			
Case number _					Chook if this is an	
(II KIIOWII)					☐ Check if this is an	
					amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	-

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

.	17.11					
Debtor 1	First Name	J Anderso	Middle Name	Last Name		
Debtor 2						
(Spouse if,	filing) First Name	Э	Middle Name	Last Name		
United S	States Bankruptcy C	ourt for the:	EASTERN DISTRICT O	PF MICHIGAN		
Case nu (if known)						☐ Check if this is an amended filing
	al Form 106					
<u>Sche</u>	dule H: Yo	ur Cod	ebtors			12/15
eople a ill it out our nar	re filing together, I , and number the e ne and case numb	ooth are equ ntries in the er (if known)	ally responsible for supp	olying correct informat In the Additional Page to	on. If more space is need this page. On the top of	as possible. If two married ded, copy the Additional Pag f any Additional Pages, write
	lo					
■ Y						
					.	
Ariz	ona, California, Ídah		I lived in a community pr Nevada, New Mexico, Pu		/? (Community property signston, and Wisconsin.)	tates and territories include
Ariz	ona, California, Idah lo. Go to line 3.	o, Louisiana,		erto Rico, Texas, Washi		tates and territories include
Ariz	ona, California, Ídah No. Go to line 3. 'es. Did your spouse \textstyle \textstyle \tex	o, Louisiana, e, former spou	Nevada, New Mexico, Puuse, or legal equivalent live	erto Rico, Texas, Washi	ngtòn, and Wisconsin.)	
Ariz	ona, California, Ídah No. Go to line 3. 'es. Did your spouse	o, Louisiana, e, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Washi	ngtòn, and Wisconsin.)	tates and territories include
Ariz	ona, California, Idah lo. Go to line 3. 'es. Did your spouse No Yes. In which co City Column 1, list all of ne 2 again as a comm 106D), Schedule Column 2.	mmunity state your codebt debtor only i	Nevada, New Mexico, Puuse, or legal equivalent live e or territory did you live? State ors. Do not include your f that person is a guaran	erto Rico, Texas, Washi e with you at the time? Zip Code spouse as a codebtor tor or cosigner. Make	if your spouse is filing ware you have listed the of GG). Use Schedule D, Sci	current address of that person. vith you. List the person sho creditor on Schedule D (Offic hedule E/F, or Schedule G to
Ariz	ona, California, Idah lo. Go to line 3. 'es. Did your spouse No Yes. In which co City Column 1, list all of ne 2 again as a com m 106D), Schedule	mmunity state your codebt debtor only i E/F (Official	Nevada, New Mexico, Puuse, or legal equivalent live e or territory did you live? State ors. Do not include your f that person is a guaran Form 106E/F), or Schedi	erto Rico, Texas, Washi e with you at the time? Zip Code spouse as a codebtor tor or cosigner. Make	if your spouse is filing ware you have listed the of GG). Use Schedule D, Sci	current address of that person. with you. List the person sho creditor on Schedule D (Office hedule E/F, or Schedule G to
Ariz	ona, California, Ídah No. Go to line 3. Yes. Did your spouse No Yes. In which co City Column 1, list all of ne 2 again as a com m 106D), Schedule Column 2. Column 1: Your c	mmunity state your codebt debtor only i E/F (Official	Nevada, New Mexico, Puuse, or legal equivalent live e or territory did you live? State ors. Do not include your f that person is a guaran Form 106E/F), or Schedi	erto Rico, Texas, Washi e with you at the time? Zip Code spouse as a codebtor tor or cosigner. Make	if your spouse is filing we sure you have listed the common to the commo	current address of that person sho creditor on Schedule D (Office hedule E/F, or Schedule G to tor to whom you owe the detect hat apply:

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

- :	in this is former than to idea.										
	in this information to ident otor 1 Kell	ey J And									
	otor 2										
Uni	ted States Bankruptcy Co	urt for the:	EASTERN DISTRICT	OF MICHIGAN							
	se number			-					ed filing ent showin	g postpetition	
0	fficial Form 106	<u> 31</u>					Ī	MM / DD/ Y	/YYY	_	
S	chedule I: You	ır Inco	me								12/15
sup spo atta	es complete and accurate plying correct information use. If you are separate chase separate sheet to the describe Emp	on. If you a d and your his form. C	are married and not filing wi	ng jointly, and you ith you, do not inc	ur spouse clude info	e is li rmat	ving with ion abou	n you, incl it your spo	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employmer information.	nt		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed				☐ Employed			
			Employment status	☐ Not employed	☐ Not employed				☐ Not employed		
	employers.		Occupation	Postal Carrier	r						
	Include part-time, seaso self-employed work.	onai, or	Employer's name	US Postal Ser	rvice						
	Occupation may include or homemaker, if it appli		Employer's address	Eagan Accou Center 2825 Lone Oa Saint Paul, M	ak Parkw		e				
			How long employed to	here? 18 ye	ears			_			
Par	t 2: Give Details A	bout Mon	thly Income								
Esti spou	mate monthly income as use unless you are separa	s of the da ated.	te you file this form. If	you have nothing to	o report fo	or any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse e space, attach a separate			ombine the informa	ition for al	l emp	loyers for	that perso	on on the li	nes below. If	you need
							For De	btor 1		btor 2 or ng spouse	
2.	List monthly gross wa deductions). If not paid				2	. \$. 7	7,973.33	\$	N/A	
3.	Estimate and list mont	thly overti	me pay.		3	. +\$	2	2,383.33	+\$	N/A	
4.	Calculate gross Incom	e. Add line	e 2 + line 3.		4	. \$	10.3	56.66	\$	N/A	

				F	or Debtor 1			Debtor		
	Copy	/ line 4 here	4.	\$	10,356	6.66	\$		N/A	_
5.	List a	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,680	.17	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$		2.73	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	866	6.67	\$		N/A	=
	5d.	Required repayments of retirement fund loans	5d.	\$	466	5.16	\$_		N/A	_
	5e.	Insurance	5e.	\$.29	\$_		N/A	_
	5f.	Domestic support obligations	5f.	\$	C	.00	\$		N/A	_
	5g.	Union dues	5g.	\$	73	3.67	\$_		N/A	_
	5h.	Other deductions. Specify:	5h	+ \$	C	.00	+ \$ _		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	5,089	.69	\$		N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,266	.97	\$		N/A	_
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.00	\$_		N/A	
	8b.	Interest and dividends	8b.	\$.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$		0.00	\$_		N/A	_
	8e.	Social Security	8e.	\$		0.00	\$_		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.00	\$_		N/A	_
	8g.	Pension or retirement income	8g.	\$.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	+ \$		0.00	+ \$_		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	C	0.00	\$_		N/A	4
40	0-1-	white monthly become A LUE - 7 - F - 0	40 6			•				
10.		•	10. \$		5,266.97	+ \$_		N/A	= \$ _	5,266.97
11.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. e all other regular contributions to the expenses that you list in <i>Schedule</i>	. J .							
	Include other	de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	deper					Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	5,266.97
									Combi	ned
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?							y income
	_	Yes. Explain:								
	ш	. oo. =xp.aiii.								

Fill	in this informa	tion to identify yo	our case:			l				
Deb	tor 1	Kelley J And	lerson			Che	ck if this is:			
	otor 2 ouse, if filing)					☐ An amended filing ☐ A supplement showing postpetition cl 13 expenses as of the following date:				
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN							MM / DD / YYYY			
	e number nown)				_					
		rm 106J				•				
Be info nur	as complete a ormation. If m mber (if know	ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people a ch another sheet to this						
Par 1.	t 1: Descr	ibe Your House nt case?	hold							
	■ No. Go to □ Yes. Doe	o line 2. s Debtor 2 live i	•	ate household? al Form 106J-2, <i>Expense</i>	s for Separate House	e <i>hold</i> of Deb	tor 2.			
2.	Do vou have	e dependents?	■ No	•	·					
	Do not list Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state dependents							□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No		
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes				☐ Yes		
Est exp	imate your ex	ate Your Ongoi penses as of your date after the I	our bankr	uptcy filing date unless	you are using this f plemental <i>Schedule</i>	orm as a su e J, check th	ipplement in a Cha ne box at the top o	apter 13 case to report f the form and fill in the		
the		n assistance an		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses		
4.		or home owners		ses for your residence.	Include first mortgag	e 4. \$	S	0.00		
	If not includ	led in line 4:								
	4b. Prope	estate taxes rty, homeowner's maintenance, re		's insurance upkeep expenses		4a. \$ 4b. \$ 4c. \$	5	0.00 0.00 100.00		
5.		owner's associat nortgage payme		dominium dues our residence, such as he	ome equity loans	4d. \$		0.00 0.00		

Official Form 106J Schedule J: Your Expenses 24-46901-tjt Doc 1 Filed 07/18/24 Entered 07/18/24 09:56:57 Page 36 of 55

Official Form 106J Schedule J: Your Expenses 24-46901-tjt Doc 1 Filed 07/18/24 Entered 07/18/24 09:56:57 Page 37 of 55

Fill in th	is informa	ation to identify your	case:			
Debtor 1		Kelley J Anderson	n			
D - 1-1		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,	=	First Name	Middle Name	Last Name		
United S	States Banl	kruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case nu	mber					
(if known)						☐ Check if this is an amended filing
Officia	l Form	106Dec				
Decl	arati	on About a	n Individual	Debtor's	Schedules	12/15
lf ture me		nla ava filing tagathar	hath are equally recover	aible for aumului	ing correct information	
ir two ma	arried peo	ple are filing together	, both are equally respor	isible for supply	ing correct information.	
						atement, concealing property, or
		or property by fraud in U.S.C. §§ 152, 1341, 1		ruptcy case can	result in fines up to \$250,	000, or imprisonment for up to 20
	Sign	Below				
	Olgii	Delow				
Did	l you pay	or agree to pay some	one who is NOT an attor	ney to help you f	ill out bankruptcy forms?	
	No					
	Yes. Na	me of person				ankruptcy Petition Preparer's Notice,
					Declaration	on, and Signature (Official Form 119)
Had	lar nanaltı	v of porium I doclare	that I have road the cum	many and cahadu	ulas filad with this dealars	tion and
		true and correct.	mat i nave read the Sum	nary and Schedu	ıles filed with this declara	tion and
Х	/s/ Kelle	y J Anderson		Х		
-	Kelley J	Anderson			ature of Debtor 2	
	Signature	of Debtor 1				
	Date Ju	ıly 10, 2024		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

FIII	in this inforr	nation to identify you	r case:			
Del	otor 1	Kelley J Anderso	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Cas	se number					
	nown)					Check if this is an mended filing
Sta	as complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
nun	nber (if know	n). Answer every ques			, adamonal pages, write you	ar name and case
1.		r current marital statu	ıs?			
	☐ Married ■ Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	<i>ı</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. state					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Pai	t 2 Expla	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$62,972.45	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	Ke	Kelley J Anderson				Case number (if known)		
					Debtor 1		Debtor 2		
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar yea Decem	r: ber 31, 2023)	■ Wages, commissions, bonuses, tips	\$106,603.00	☐ Wages, combonuses, tips	missions,	
					☐ Operating a business		☐ Operating a	business	
				r before that: ber 31, 2022)	■ Wages, commissions, bonuses, tips	\$75,729.00	☐ Wages, combonuses, tips	missions,	
					☐ Operating a business		☐ Operating a	business	
	winn	ings. each s No	f you ar	e filing a joint ca	; pensions; rental income; inter ise and you have income that y come from each source separa	ou received together, list it o	only once under De	ebtor 1.	ы даньшід ано юцегу
					Debtor 1		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certaiı	n Payments You	u Made Before You Filed for	Bankruptcy			
6.	Are	eithe r No.	Neithe individ	er Debtor 1 nor ual primarily for	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	imer debts. Consumer debt d purpose."		_	01(8) as "incurred by an
			During		ore you filed for bankruptcy, di	d you pay any creditor a tota	11 of \$7,575° or mo	re?	
				es List below paid that c	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	its for domestic support oblig			
			* Sub		nt on 4/01/25 and every 3 years		or after the date of	f adjustmen	t.
		Yes.			or both have primarily consurer you filed for bankruptcy, di		l of \$600 or more?	,	
			■ N	o. Go to line	7.				
			□ _Y	include pa	each creditor to whom you pai yments for domestic support of or this bankruptcy case.				
	Cre	ditor'	s Name	and Address	Dates of payme	nt Total amount	Amount you	Was this	payment for

Deb	Kelley J Anderson		Cas	se number (if known)		
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corpor of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including of a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	NoYes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer a	any property on a	ccount of a de	bt that benefited an
	No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for t	his payment
	t 4: Identify Legal Actions, Repossession		paid	Still Owe	include credi	tor's name
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Dr Tedder Office PLLC v Kelly Anderson 23-0351 SC	Collections	12th District Court - Jackson 312 South Jackson Jackson, MI 49202		☐ Pending ☐ On appeal ☐ Concluded	
	George Gusses V Kelley Anderson 24-00827 GC	Collections	2A District Cou 425 N. Main St Adrian, MI 492	reet	☐ Pending ☐ On appea ☐ Conclude	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garni	shed, attached	, seized, or levied? Value of the
	Creditor Name and Address	Explain what happene	d	Date		property
 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 		mounts from your				
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an □ No □ Yes		erty in the possess	ion of an assigne	e for the bene	it of creditors, a

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1 Kelley J Anderson	Case number	(if known)	
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	y, did you give any gifts with a total value of more t	than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contri	y, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling? No Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	Describe the property you lost and how the loss occurred Incl	scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending trance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prep	, did you or anyone else acting on your behalf pay aring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	MARRS & TERRY, PLLC 6553 JACKSON AVE Ann Arbor, MI 48103	\$313 Filing Fee \$50 Cin legal data	7-6	\$363.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and va property transferre		payme	be any property or ents received or debts a exchange	Date transfer was made	
	Person's relationship to you			•	J		
	Unknown	2012 Chevy Equi \$2000 to man sav sale sign on car			July 2023 to or. Debtor paid to Main	7 2023	
	None						
19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 						
	Name of trust	Description and va	lue of the prop	erty trans	ferred	Date Transfer was made	
	t 8: List of Certain Financial Accounts, Instru	, ,	,	J			
20.	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.						
	Name of Financial Institution and La	ast 4 digits of ccount number	•		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	nr before you filed for b	oankruptcy, any	y safe dep	osit box or other deposit	ory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Stro State and ZIP Code)		Describe t	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		he contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	r Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Includ	de any property	you borr	owed from, are storing fo	or, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		Describe t	he property	Value	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Kelley J Anderson Case number (if known)

Part 10:	Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		aw, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that	you know about, regardless of when	they occurred.				
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmenta							
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Co	onnections to Any Business					
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	of the following connections to any	y business?			
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity, o	either full-time or part-time				
	☐ A member of a limited liability compan	y (LLC) or limited liability partnership	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing exec	utive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code)

Name of accountant or bookkeeper

No. None of the above applies. Go to Part 12.

Dates business existed

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 1 Kelley J Anderson		Case number (if known)
	Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement to	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part	12: Sign Below		
are to with 18 U.	rue and correct. I understand that making a bankruptcy case can result in fines up t S.C. §§ 152, 1341, 1519, and 3571. Kelley J Anderson	a false statement, concealing property, or o \$250,000, or imprisonment for up to 20 y	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
	ley J Anderson nature of Debtor 1	Signature of Debtor 2	
Date	July 10, 2024	Date	
Did y ■ No	5	nent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
Did y		ot an attorney to help you fill out bankrup	tcy forms?
□ Ye	es. Name of Person . Attach the Bank	ruptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

In re	Kelley J Anderson		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

- 1. The undersigned is the attorney for the Debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]
 - [X] FLAT FEE For legal services rendered in contemplation of and in connection with this case, A. 3,500.00 В. 0.00 C. 3,500.00 [] RETAINER Α.
 - B. The undersigned shall bill against the retainer at an hourly rate of \$_____. [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
- 3. \$ 313.00 of the filing fee has been paid.
- 4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
 - A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - D. Representation of the debtor in adversary proceedings and other contested bankruptey matters;
 - E. Reaffirmations;
 - F. Redemptions;
 - G. Other:

THIS FIRM RESERVES THE RIGHT TO FORGO THE "NO LOOK FEE" AND INSTEAD FILE AN APPLICATION FOR FEES REPRESENTING TIME SPENT ON ANY CHAPTER 13 CASE. THIS MAY RESULT IN TOTAL FEES AND EXPENSES IN EXCESS OF THE ORIGINALLY QUOTED FEE. TIME SPENT ON YOUR CASE WILL BE BILLED IN INCREMENTS OF 6 MINUTES AND WILL INCLUDE ALL TIME SPENT BY ATTORNEYS AND STAFF IN THE PROSECUTION OF YOUR CASE INCLUDING TRAVEL TIME AND TELEPHONE CALLS. WORK PERFORMED AFTER CONFIRMATION WILL BE BILLED AT AN HOURLY RATE AS APPLICABLE AND WILL BE PAID THROUGH THE CHAPTER 13 PLAN UPON ENTRY OF AN ORDER AWARDING FEES PURSUANT TO A FEE APPLICATION. CLIENT IS RESPONSIBLE FOR PAYMENT OF FEES IF NOT PAID IN FULL THROUGH THE PLAN.

THE CLIENT(S) WILL BE RESPONSIBLE FOR FEES AND COSTS INCURRED AND NOT PAID THROUGH THE TRUSTEE. THIS MAY OCCUR DUE TO INADEQUATE PAYMENTS INTO THE PLAN OR FOR WORK PERFORMED ON BEHALF OF THE CLIENT(S) AFTER PAYMENTS INTO THE PLAN HAVE CEASED, TYPICALLY AT THE COMPLETION OF THE CASE.

5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CHAPTER 7 CASES-THE ABOVE FEE DOES NOT INCLUDE REPRESENTATION IN ANY MOTION FOR RELIEF OR OTHER MOTION FILED BY EITHER THE CHAPTER 7 TRUSTEE OR UNITED STATES TRUSTEE. FEES FOR SUCH SERVICES ARE SEPARATE AND WOULD BE ADDRESSED IN A SEPARATE FEE AGREEMENT EXECUTED AT THE TIME SUCH ISSUE AROSE. THIS APPLIES TO ANY ADVERSARY PROCEEDING OR OTHER NON-DISCHARGEABILITY ACTION AS WELL. DEBTOR SHALL BE BILLED AN ADDITIONAL \$250 FOR ATTENDANCE AT ANY ADDITIONAL 341 MEETING OF THE CREDITORS.

6.	The source of paymen	its to the undersigned was from:	
	A. XX	Debtor(s)' earnings, wages, compensat	tion for services performed
	В.	Other (describe, including the identity	of payor)
7.	C	not shared or agreed to share, with any other pensation paid or to be paid except as follows	person, other than with members of the undersigned's law firm or
Dated:	July 10, 2024		/s/ Tricia S. Terry
			Attorney for the Debtor(s)
			Tricia S. Terry
			Marrs & Terry, PLLC
			6553 Jackson Rd
			Ann Arbor, MI 48103
			734-663-0555
			TTerry@marrsterry.com; mandtecf@gmail.com
			P59522 MI
Agreed:	/s/ Kelley J Ande	rson	
J	Kelley J Anderso	on .	
	Debtor		Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Kelley J Anderson		Case No.				
		Debtor(s)	Chapter	13			
VERIFICATION OF CREDITOR MATRIX							
Γhe abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.			
Date:	July 10, 2024	/s/ Kelley J Anderson					
		Kelley J Anderson					
		Signature of Debtor					

Alexis Anderson PO Box 45 Brooklyn, MI 49230

Bixby Anesthesia Associates P.O. Box 456 Adrian, MI 49221

BMG Money Attn: Bankruptcy 444 Brickell Avenue Suite 250 Miami, FL 33131

Carrington Mortgage Services Attn: Bankruptcy 1600 South Douglass Road, Stes 110 & 200 Anaheim, CA 92806

Congress Collection 28552 Orchard Lake Rd Suite 200 Farmington, MI 48334

Consultants in Lab Medicine of Greater T PO Box 930521 Atlanta, GA 31193

Consumer Energy One Energy Plaza Jackson, MI 49201

Dept of Housing & Urban Development 451 7th Street SW Washington, DC 20410

Dr. Tedders 3595 Ann Arbor Rd Jackson, MI 49202 Driveway Finance Corp Attn: Bankruptcy 150 N. Bartlett St. Medford, OR 97501

ECMC
Attn Bankruptcy Department
PO Box 16408
Saint Paul, MN 55116

Education Department Office of General 400 Maryland AVe SW Room 6E353 Washington, DC 20202

George Gusses, Co. 33 S. Huron Street Toledo, OH 43602-1705

GreenSky
Attn: Bankruptcy
5565 Glenridge Connector Suite #700
Atlanta, GA 30342

High Priority Loans 229 S Main St Suite 1300 Salt Lake City, UT 84111

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Nelnet Attn: Bankruptcy Claims P.O. Box 82505 Lincoln, NE 68501

One Main Financial Attn: Bankruptcy Po Box 3251 Evansville, IN 47731

RMP PO Box 630844 Cincinnati, OH 45263 Robert M Doane MD PC 1701 Lake Lansing Rd., Ste 100 Lansing, MI 48912-3798

State of Michigan Dept of Treasury Bankruptcy Unit PO Box 30168 Lansing, MI 48909

System & Services Techonologies Inc PO Box 801997 Kansas City, MO 64180

Trinitiy Health 20555 Victor Pkwy Livonia, MI 48152

True Community Credit Union Attn: Bankruptcy Dept 1100 Clinton Rd Jackson, MI 49201

US Attorney Attn: Civil Division 211 W. Fort Street Suite 2001 Detroit, MI 48226